

APPLICATION FOR ZONING CERTIFICATE

VILLAGE OF VERSAILLES,
177 N. CENTER ST.
VERSAILLES, OH 45380

PHONE: 937.526.3294



OFFICIAL ACTION TAKEN:

Date: _____

By: _____

PERMIT NO: _____

ZONING DISTRICT: _____

FEE: _____

APPROVED: _____

The undersigned hereby applies for a zoning certificate for the above use, to be issued on the basis of the representations contained herein, all of which is application swears to be true. **(Please use reverse side or attach site drawing of proposed improvement. Site drawing to include accurate dimensions and size of the site area (lot or parcel), the location and size of all existing and proposed buildings, signs and structures within the site as well as the existing or proposed use of such building (s) or structure(s).)**

1. Building plans must be approved by the developers of the subdivision.
2. It is the responsibility of the contractor and/or property owner to obtain a building permit from the Darke County Building Regulations Office. Please call 937.547.7379 for additional details.
3. Contractor shall contact the Village after new home boundary is staked to allow for zoning setbacks to be verified by the Village prior to construction commencing. Contact Village Office at 937.526.3294 to schedule inspections.

This is a request to receive ZONING AUTHORIZATION for (Check Appropriate)

- NEW CONSTRUCTION ACCESSORY BUILDING SIGN
 OTHER: Please explain: _____

The APPLICANT for this zoning certificate IS IS NOT the property owner of record.

APPLICANT NAME: _____ PHONE NUMBER: _____

APPLICANT ADDRESS _____
 STREET CITY STATE ZIP

CONTRACTOR NAME: _____ ADDRESS: _____
 CONTRACTOR PHONE NUMBER: _____

The PROPERTY SUBJECT TO RECEIVE THIS ZONING AUTHORIZATION is:

OWNER'S NAME: _____ PHONE NUMBER: _____

OWNER'S ADDRESS: _____
 STREET CITY STATE ZIP

TAX ID NUMBER: _____

DESCRIBED AS: A parcel of _____ acres, having a total of _____ feet of road frontage located along the N S E W side of _____

Street with the most frontage or assigned street address

THE DIMENSIONS OF THE SUBJECT LOT PARCEL are:

BUILDING LINE FRONTAGE(s) totaling _____ feet
 AREA & SHAPE: _____ SQ FT. of Area being of REGULAR IRREGULAR CUL-DE-SAC
 AVERAGE DEPTH: _____ FT, measured from Road R/W Curb Line Road Center Line

The current property use is VACANT RESIDENTIAL BUSINESS INDUSTRIAL OTHER
 and more specifically described as: _____

The proposed improvement will best fit under RESIDENTIAL BUSINESS INDUSTRIAL OTHER
 and more specifically described as: _____

Describe in detail what the proposed improvement will be used for: _____

The cost of this improvement (including labor) estimated at fair market price is: _____

PERTINENT DIMENSIONS ASSOCIATED WITH THE PROPOSED IMPROVEMENTS ONLY:

NON-RESIDENTIAL IMPROVEMENTS If new or additional primary business area, indicate GROSS and NET floor area.
 GROSS F.A. : _____ S.F. Gross Floor Area shall be computed by the overall dimensions taken from outside wall to outside wall.
 NET F.A. : _____ S.F. Net Floor Area shall be computed by subtracting from the gross floor area of all portions of the building used for the housing of mechanical or central heating equipment; incidental and non-mercantile storage areas; attic spaces providing structural headroom of less than seven (7) feet six (6) inches; uncovered steps; terraces; breezeways and open porches; private garage or basement automobile parking spaces; accessory or off-street loading berths not exceeding twice the space required by zoning.

_____ # of Off Street Parking Spaces _____ Parking Space Size _____ Width of Aisleway/Drive _____ Use Class

RESIDENTIAL/BUSINESS IMPROVEMENTS GROSS: _____ S.F. FINISHED. : _____ S.F.
 If new or additional living quarters, indicate GROSS and FINISHED living area for the appropriate improvement as proposed.

BUILDING/SIGN SIZE WIDTH _____ FT. LENGTH _____ FT. HEIGHT _____ FT.
 _____ L.F. (FENCE) _____ FT (POOL DEPTH)

FOUNDATION BASEMENT CRAWL SPACE SLAB
 NO PERMANENT FOUNDATION

SETBACKS (Where Applicable) FRONT YARD DEPTH* _____ FT. REAR YARD DEPTH _____ FT.
 _____ SIDE, _____ FT. _____ SIDE, _____ FT.

*FRONT YARD DEPTH shall be measured from the road right of way line as established by the Official Thoroughfare Plan for the Village of Versailles.

Applicant Signature _____ Date _____

Application Received By: _____ Application Reviewed By: _____
 Date Received: _____ Date Reviewed: _____